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Mississippi Secretary of State
Herber Ladner Building, 401 Mississippi Street
P.O. Box 136, Jackson, MS 39205

ADMINISTRATIVE PROCEDURES FILING NOTICE

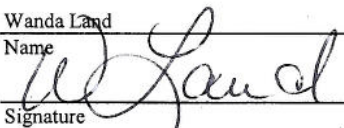
Agency MS Department of Employment Security
Address MS Department of Employment Security
P.O. Box 1699
Jackson, MS 39215


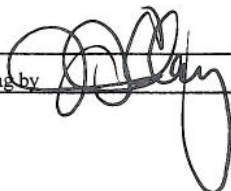
Person to contact: Wanda Land
Address 1235 Echelon Parkway
Phone 601-321-6597
Transmittal date December 5, 2005

Copy attached: ☒ Yes ☐ No

Name or number of rule(s) Policy Number 10, Revision 1- Waiver of Regulatory Provisions

Terms or substance of the action or description of the subject and issues: The purpose of this policy is to set the minimum requirements for requesting a waiver of the Workforce Investment Act (WIA) regulatory provisions.

Printed name and title of person authorized to file rules: Wanda Land Manager, Office of Grant Management
Name Title

Signature

EMERGENCY RULES	PROPOSED ACTION ON RULES	FINAL ACTION ON RULES
<input type="checkbox"/> Original filing <input type="checkbox"/> Renewal of effectiveness To be in effect <input type="checkbox"/> days Effective date: <input type="checkbox"/> Immediately on <input type="checkbox"/> Other (specify):	Action proposed: <input type="checkbox"/> New rule(s) <input checked="" type="checkbox"/> Amendment to existing rule(s) <input type="checkbox"/> Repeal of existing rule(s) <input type="checkbox"/> Adoption by reference Proposed date of adoption <input checked="" type="checkbox"/> 30 days after filing <input type="checkbox"/> Other (specify):	Action taken: <input type="checkbox"/> Adopted with no changes in text <input type="checkbox"/> Adopted with changes <input type="checkbox"/> Adopted by reference <input type="checkbox"/> Withdrawn Date action taken <input type="checkbox"/> 30 days after filing <input type="checkbox"/> Other (specify):
OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP 	OFFICIAL FILING STAMP
Accepted for filing by	Accepted for filing by 	Accepted for filing by